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SERIAL NUMBER 10/748,602	FILING DATE 12/30/2003 RULE	CLASS 273	GROUP ART UNIT 3711	ATTORNEY DOCKET NO. 3101-1
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APPLICANTS

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** CONTINUING DATA ***** *BHL*

This application is a CIP of 10/100,359 03/18/2002 ABN
 which claims benefit of 60/277,018 03/19/2001
 and claims benefit of 60/314,503 08/23/2001

** FOREIGN APPLICATIONS ***** *none*

IF REQUIRED, FOREIGN FILING LICENSE
 GRANTED

** SMALL ENTITY **

** 04/29/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after	STATE OR COUNTRY IL	SHEETS DRAWING 8	TOTAL CLAIMS 8	INDEPENDENT CLAIMS 3
Verified and Acknowledged	<i>Bejn</i> Allowance Examiner's Signature <i>BHL</i> Initials				

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TITLE

Play four poker

<p>FILING FEE RECEIVED 385</p>	<p>FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:</p>	<table border="1"><tr><td><input type="checkbox"/> All Fees</td></tr><tr><td><input type="checkbox"/> 1.16 Fees (Filing)</td></tr><tr><td><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)</td></tr><tr><td><input type="checkbox"/> 1.18 Fees (Issue)</td></tr><tr><td><input type="checkbox"/> Other _____</td></tr><tr><td><input type="checkbox"/> Credit</td></tr></table>	<input type="checkbox"/> All Fees	<input type="checkbox"/> 1.16 Fees (Filing)	<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)	<input type="checkbox"/> 1.18 Fees (Issue)	<input type="checkbox"/> Other _____	<input type="checkbox"/> Credit
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